

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	T.A. 8	5C 844	3-13-01 03 16 01
RESPONSE FORMALITY REVIEW			

BEST AVAILABLE COPY

INDEX OF CLAIMS

- ✓ Rejected N Non-elected
- = Allowed I Interference
- (Through numeral)... Canceled A Appeal
- ÷ Restricted O Objected

Claim	Date
Final	10 5
Original	3 2 1
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Claim	Date
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If more than 150 claims or 10 actions
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